

those in which there was demonstrable or suspected tuberculosis, and the so-called idiopathic cases. Of thirteen belonging to the first class, inoculations in guinea-pigs gave positive results in seven. Of inoculations in twelve suspected cases, three were negative. A similar proportion was observed in the so-called idiopathic cases, nine out of twelve causing tuberculosis in guinea-pigs. This confirms the view that most cases of idiopathic pleurisy are tuberculous. That such cases may recover completely is emphasized by the author. Aschoff thinks it very doubtful whether rheumatic pleurisy ever occurs without the joints or the heart being also affected. In the sixteen cases observed by him a complication on the part of the heart was not missed once. As regards the question of serous exudate and pyogenic bacteria, the author draws the conclusion that such exudates are almost always free from bacteria. If pyogenic organisms are present, suppuration is likely to occur sooner or later. This is not so often the case when pneumococci are present, probably by reason of the early death of those organisms. The author holds that the spontaneous recovery of serous pleurisy is not uncommon, and that salicylic acid has no advantage in its treatment.—*Zeitschrift für klin. Med.*, Bd. xxix. p. 440.

GASTROSCOPY.

PERL (*Zeitschrift für klin. Med.*, Bd. xxix. p. 494) has made some observations which throw much light on the difficult subject of gastroscopy. The position and shape of the cardia were learned by making plaster-of-Paris casts. These show that the subphrenic part of the œsophagus is more fixed than the thoracic part, and that its direction is usually toward the left. The cardia was usually found at the level of the twelfth dorsal vertebra. The average length from the incisors to the cardia was found to be 60 cm. In passing metallic sounds of 12 mm. diameter the instrument is introduced at the right angle of the mouth, by which the difficulty presented by the turn to the left in the lower part is overcome. Out of twenty-three men only three failures were met with; out of ten women only one—a much more favorable showing than most investigators have been able to make. In some cases the passage of the instrument is hindered by a spasm of the œsophagus, usually of neurasthenic origin. A natural difficulty is presented by short and thickset persons, in whom the passage of an œsophageal sound may be impossible. Other obstacles are exudates, tumors of the liver or stomach, and curvature of the spine.

THE DIAGNOSIS OF CYSTICERCUS IN THE BRAIN.

MORITZ (*St. Petersburger med. Wochenschrift*, 1896, No. 10) had a case in which the diagnosis of benign tumor in the posterior fossa was made during life. Autopsy showed a cysticercus cyst as large as a hen's-egg. From a study of other reported cases, some of them closely resembling his own, Moritz draws the following conclusions as to the diagnosis of cysticercus in the brain when there are no external cysts:

1. There are signs of a severe afebrile, non-inflammatory disease of the brain, the chief symptoms being irritative.
2. Paretic symptoms speak against cysticercus, except in the last stage.

3. Choked disk is always present.

4. The exclusion of other brain-tumors is only possible by continued observation. Malignant new growths have a more uniform course. Gliomata sometimes show periods of improvement, but usually have more severe symptoms than has cysticercus. Isolated tubercles, which occur especially in the cerebellum, also have a protracted course, but with them pain, headache, and dizziness are more constant. Slowly growing cysticerci cause irregular exacerbations of convulsions, headache, and dizziness, alternating with periods of comparative comfort, the latter sometimes lasting weeks or months.

5. Death usually occurs in convulsion.

Abstracts of all the available cases are appended to this paper.

SIMULATED PAROXYSMAL HÆMOGLOBINURIA.

RICHTER reports the case of a man, who, having had an extensive experience in hospitals, endeavored to simulate paroxysmal hæmoglobinuria. His urine contained blood, leucocytes, and detritus. The temperature rose to 42.2° C. As the patient had previously simulated hæmoptysis, and as he did not feel hot to the touch, notwithstanding the high temperature, and as his intellect was clear, the urine-glass was carefully watched and the temperature taken in the rectum. From that time the man remained free from symptoms.—*Prager med. Wochenschrift*, 1895, No. 35.

THYROIDIN.

BAUMANN furnishes some interesting additions to our knowledge of this substance (*Münchener med. Wochenschrift*, 1896, No. 14; see THE AMERICAN JOURNAL OF THE MEDICAL SCIENCES, May, 1896, p. 597).

The greater part of thyroïdin occurs in the gland in combination with two albuminous bodies, an albumin and a globulin, especially the former. The effect of thyroïdin on parenchymatous goitres, myxœdema, and obesity was found to be precisely like that of the gland itself. Observations on metabolism in men and animals gave the same results, and finally accidental intoxication from overdoses also showed the new substance to represent the characteristic constituents of thyroid gland. Experiments show that the action of thyroïdin is more prompt than that of the gland, which may be explained by the fact that it must be liberated from the gland by digestion.

A very interesting fact brought out by Baumann is that the amount of iodine in the thyroid is much greater in normal than in goitrous glands, and greater in non-goitrous than in goitrous localities. So in Freiburg, where goitre is common, the average amount of iodine in the thyroids of adults was found to be 2 mg., whereas in glands from Hamburg, though only half as large as the former, the average was 3½ mg. In children the difference was still greater. Disease other than goitre did not seem to affect the amount of iodine, which was not greater in the thyroid of suicides than in persons dying of various diseases. In early life and old age the amount is relatively small; greatest between twenty-five and fifty-five years. The kind of food, especially the use of sea-fish, has a marked effect on the amount of iodine in the gland.